



## Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at <http://about.jstor.org/participate-jstor/individuals/early-journal-content>.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact [support@jstor.org](mailto:support@jstor.org).

# TRACING THE SOURCES AND LIMITING THE SPREAD OF INFANTILE PARALYSIS

## FIRST PAPER

By CHARLOTTE TALLEY, R.N.

*Montclair, New Jersey*

Read Emerson's essay on "Compensation" and you will be in a proper frame of mind to believe that there is even compensation for this fateful grasp of a monster hand which is crushing out young lives and leaving others maimed and helpless. This plague upon youth, which has shaken parenthood to its foundations, has aroused the people permanently to a sense of their own responsibility and that of the civic authorities in preventing disease. A low accompaniment to the voices of medical experts and city officials in regard to the conditions and possibilities concerning infantile paralysis, is the murmur of the people. What are they saying? And what are they thinking and doing under the lash of this scourge, while trained minds are assuming charge of the situation?

"Come in and let me tell you something," said a Russian Jewish mother of the East Side in New York City, opening wide her door to a nurse from the Board of Health, who was distributing yellow leaflets with precautions against "Polio" (the medical nickname for poliomyelitis or infantile paralysis). "You see my house," with a sweep of the hand to indicate scrubbed floors and dustless furniture. "I keep always like this and the children I bathe every day." On the wash-tub sat a boy of two and on a chair by the window a girl of five, both clean but unhappy. "Some of the women, you should see them, they work all day now throwing out trash and cleaning the children. They never kept clean before, but they are scared that dirt brings the sickness and I guess it does." "Tell me what to do," continued the woman with an anxious look, as with trembling fingers she finished dressing the wide-eyed boy. "I am scared to take the children out and they hate to stay in. My man and I will spend all our money to take them away from the city if they should go. What shall we do?"

The nurse advised this mother to take her children out every day, away from their own neighborhood, as a red and white placard across the street warned of a case of paralysis, and not to make herself ill with worry, because, after all, out of 1,600,000 children under sixteen years of age in Greater New York, comparatively few were stricken.

In India there is a legend about the Spirit of Plague which threatened to destroy five thousand persons in a certain city. When ten thousand died and the Plague Spirit was accused of exceeding the number of his prophecy he replied: "I only killed five thousand. Fear killed the rest."

It is the mothers who are most fearful of paralysis and who guard most carefully against it, whose children are generally attacked, and there is the same mystery in this, except to mental scientists, as there is in the fact that physicians often die of the disease they specialize in treating.

Everywhere the Board of Health nurse on her rounds of inspection was met by the worried but controlled faces of mothers, the only care free women being those who cheerfully replied to inquiries made at their doors concerning the health of children, "I have no children." Out of 106 flats visited in one day in an infected district, only twenty-four were vacant, and from one house, only, had there been a general exodus, nine flats out of twelve having been vacated across the street from a placarded house. Many families wanted to go away but were unable to do so. But strangely a case of paralysis will often run its course in a tenement where there are as many as 50 children without a second infection occurring.

Some women received in stricken silence the dodger which the nurse handed them; they could not read English and the older children explained the directions to them, while the nurse appeared as reassuring as she could, for there was so pitifully little she could say to soften the facts presented, which were as follows:

Infantile paralysis is very prevalent in this part of the city. On some streets many children are ill. Keep your children off the streets as much as possible and be sure to keep them out of the houses on which the Board of Health has put a sign. This is a disease which babies and young children get; many of them die; and many who do not, become paralyzed for life. Don't let your children go to parties or picnics or outings. Don't let them play with any children who have sickness at home. The daily papers will tell you in what homes the disease is. If your child is sick, send for your doctor at once, or send word to the Board of Health.

Some true cases of paralysis are discredited. Parents find it difficult to believe that a child that has only been feverish, with a stomach or intestinal disturbance, could possibly have "Polio," and when they hear of such a case they believe that any ill child is likely to be taken away from them. They dread to have their children removed to the hospital because they are only allowed to see them once after admission, so crafty mothers often conceal a child who is slightly ill.

"It was all right to take my boy that died to the hospital," moaned a heart-broken German mother, with only one child left in her spotless new flat, "but the baby wasn't sick at all. I was nursing him and now he'll die too, being put on the bottle this hot weather." This woman listened attentively while the nurse explained to her that there were three different types of paralysis and that the abortive cases were as great a menace to other children from the point of infection as the severe ones. Then she said, "But my baby needs me most."

Some parents see signs of the dread disease if any other illness attacks their children. One mother had a child ill with German measles and because she did not know that with infantile paralysis there is no rash, this distraught woman believed the doctor was hiding the truth from her and scanned the nurse's face keenly for signs of its admission.

The younger children seem instinctively to share their mother's fear; but the older ones are philosophical. "There is a case of this sickness on the first floor," said a self-possessed little Jewess, "but it's just a touch of it. We all play on this floor and run by the door when we go out." Someone's imagination, her own or another's, had misled this child. She assured the nurse that the little girl on the first floor had a paralyzed face. Later this was proven a myth, as the child was found to be only recovering from a cold.

One slight little Italian woman with a healthy but teething baby, reasoned about her own fears. "I know I'm foolish," she said, "but every little thing that's wrong I have my baby dead and buried. I do nothing but clean the rooms and take care of him, but what frightens me so is that the bambino that died across the way was such a healthy boy and his mother took such good care of him. She took him to the Park every day and fed him well. Tell me what more I can do."

"You'd better get netting for the baby's crib," said the nurse. Tenement house windows are not screened and there were a few flies in sight near the peacefully sleeping baby. The nurse had found in each case of paralysis some act or condition which seemed responsible for the infection. When nothing else was discoverable, there were always at least a few flies about, which might have been carriers. It has been demonstrated that domestic flies experimentally contaminated with the virus of poliomyelitis remain infective for forty-eight hours or longer.

Tenants everywhere welcome the nurse inspector and look to the health authorities to remedy unfavorable conditions. They fear to give their names in making complaints lest the landlord ask them to move out, but they call attention in confidence to foul odors from sinks, defective plumbing, refuse on roofs and in courtyards, and dumb-

waiters that need disinfecting. One man wanted the garbage removed earlier in the day. Another man reported that push-cart peddlers kept decaying fruit and vegetables in locked basements below him and that he was sure these were a source of danger, because the odor from them was noticeable.

Eyes and noses everywhere are in service for the children in regard to local conditions, and awakened minds are considering different phases of the problem. The opinion seemed to be general with the people who were keeping their homes clean, that there was some defect somewhere in their surroundings. "What causes this sickness?" they all asked, and "What shall we do?" The latter question was easier to answer than the first because suggestions could always be made to improve sanitary conditions, but the cause of this terrifying malady is still problematical. The investigators may yet discover that as they have identified the mosquito with malaria and yellow fever, the rat with bubonic plague, the tsetse fly with sleeping sickness, some unknown agent is the real criminal in this plague. The chief mode of demonstrated conveyance of the virus is still the agency of the human being. Visiting infected districts strengthens the belief that faulty sanitation is conducive to the spread of the disease, at least, if not to its generation.

There was condemnation expressed by some tenants of others who left their garbage cans uncovered or who threw rubbish into the court. One woman said that the trouble with stopping such carelessness was the difficulty of finding out who was guilty. She could see the women in other tenements and watch what they did, from her window, but she could not see the people in her own house. "But we're getting after 'em," she declared, angry glints in her Irish eyes, "and when we catch 'em we'll call a cop and they'll pay a fine, sure."

The offenders, however, are few in number compared with the clean, decent people among the tenement population. Since the poorer districts, either rural or urban, where unsanitary conditions exist, appear to be the source of the epidemic, is not the model tenement a possible solution of this serious question?

If we get near enough to appreciate the courage, sacrifice, and devotion in the lives of those who labor hardest and are paid least, we wish to see them given a bigger chance for development. Humanity generally grasps any opportunity offered it to reach a higher plane. These lives are not unimportant; least of all the young lives. If we are to give our citizens their inalienable right to life, liberty, and the pursuit of happiness, they, the least of them, should be housed so that

their health is conserved and their children may be born into a safe environment.

The majority of New York's population in the districts affected by infantile paralysis will not easily become indifferent again to their surroundings. A long step forward has been taken toward cleaner and more sanitary living, and material improvement will result from the spiritual upheaval in the lives of the people through this menace to their children.

---

### THE NEED OF TRAINED PUBLIC HEALTH NURSES

The first thing that is needed to carry on health work of any kind, whether it is tuberculosis or otherwise, in every community, is organization, not a charitable affair which is made up of a few interested citizens, but boards of health, properly organized, competently manned, sufficiently financed by local or state government and built up along the lines of efficiency. Prevention of disease is a business proposition. If we expect the business to bring results, the organization must be built up on a business basis, with men and women in charge who are trained in the business. Short of that, we can never hope to get results.

We need the organization first before we should proceed to do things. We need competent individuals in control who make themselves responsible for working out the details of a complicated problem. If we were to start in the business of manufacturing a commercial product with the expectation of making a handsome profit, we would first of all demand that the undertaking be properly organized and that individuals be placed in charge who are qualified. If we expect to get results in health matters, we must organize the health supervision of every community, on a business basis. The work must be taken out of the hands of the incompetent and placed in the hands of trained individuals. I consider health protection far more important than either police or fire protection, and yet we are spending from \$1 to \$2.50 per capita annually for fire protection; from 50 cents to \$2 for police protection and only from 1 cent to about 20 cents per capita for health protection. What can you expect from health organizations which are dependent for success upon charity, upon time stolen from other business, and upon inefficiency?—*From a paper read by Dr. William DeKleine before the Michigan State Nurses' Association*